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FROM: Linda L. Berger (Typed or printed name of person signing Certificate)

Fax No. 513-634-3007 Phone No. 513-634-0885

Application No. : 09/700,561

Inventor(s) : Gregory Ashton et al.

Filed : November 16, 2000

Docket No. : AA315X

Confirmation No. : 6013

FACSIMILE TRANSMITTAL SHEET AND
CERTIFICATE OF TRANSMISSION UNDER 37 C.F.R. §1.8

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- 1) Fee Transmittal Form- 1 Page
- 2) Appeal Brief – 17 Pages
- 3)

Number of Pages Including this Page: 19 Pages

Comments:

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PTO/SB/17 (1-06)
U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

FEE TRANSMITTAL for FY 2006		Complete if Known	
Patent fees are subject to annual revision. Effective December 8, 2004		Application Number	09/700,561
		Confirmation Number	6013
		Filing Date	November 16, 2000
		First Named Inventor	Gregory Ashton et al.
		Examiner Name	Michele M. Kidwell
		Art Unit	3761
TOTAL AMOUNT OF PAYMENT (\$500)		Docket No.	AA315X

METHOD OF PAYMENT			FEE CALCULATION (continued)																																														
<p>1. <input checked="" type="checkbox"/> The Director is hereby authorized to charge indicated fees submitted on this form, credit any over payments, and charge any additional fee(s) during the pendency of this application to:</p> <p>Deposit Account Number: 16-2480 Deposit Account Name: The Procter & Gamble Company</p>			<p>5. ADDITIONAL FEES</p> <table> <thead> <tr> <th><u>Fee Description</u></th> <th><u>Fee Paid</u></th> </tr> </thead> <tbody> <tr> <td>Extension for reply within 1st month</td> <td>(\$120) <input type="checkbox"/></td> </tr> <tr> <td>Extension for reply within 2nd month</td> <td>(\$450) <input type="checkbox"/></td> </tr> <tr> <td>Extension for reply within 3rd month</td> <td>(\$1,020) <input type="checkbox"/></td> </tr> <tr> <td>Extension for reply within 4th month</td> <td>(\$1,590) <input type="checkbox"/></td> </tr> <tr> <td>Extension for reply within 5th month</td> <td>(\$2,160) <input type="checkbox"/></td> </tr> <tr> <td>Information Disclosure Statement fee</td> <td>(\$180) <input type="checkbox"/></td> </tr> <tr> <td>37 CFR 1.16(f) Late Oath/Declaration (nonprovisional)</td> <td>(\$130) <input type="checkbox"/></td> </tr> <tr> <td>37 CFR 1.17 (q) Surcharge - Late provisional filing fee or cover sheet</td> <td>(\$50) <input type="checkbox"/></td> </tr> <tr> <td>Non-English specification</td> <td>(\$130) <input type="checkbox"/></td> </tr> <tr> <td>Notice of Appeal</td> <td>(\$500) <input type="checkbox"/></td> </tr> <tr> <td>Filing a brief in support of an appeal</td> <td>(\$500) <input type="checkbox"/> [500]</td> </tr> <tr> <td>Request for oral hearing</td> <td>(\$1,000) <input type="checkbox"/></td> </tr> <tr> <td>Acceptance of unintentionally delayed claim for priority under 35 U.S.C. 119, 120, 121, or 365 (a) or (c)</td> <td>(\$1,370) <input type="checkbox"/></td> </tr> <tr> <td>Other: _____</td> <td><input type="checkbox"/></td> </tr> </tbody> </table>		<u>Fee Description</u>	<u>Fee Paid</u>	Extension for reply within 1 st month	(\$120) <input type="checkbox"/>	Extension for reply within 2 nd month	(\$450) <input type="checkbox"/>	Extension for reply within 3 rd month	(\$1,020) <input type="checkbox"/>	Extension for reply within 4 th month	(\$1,590) <input type="checkbox"/>	Extension for reply within 5 th month	(\$2,160) <input type="checkbox"/>	Information Disclosure Statement fee	(\$180) <input type="checkbox"/>	37 CFR 1.16(f) Late Oath/Declaration (nonprovisional)	(\$130) <input type="checkbox"/>	37 CFR 1.17 (q) Surcharge - Late provisional filing fee or cover sheet	(\$50) <input type="checkbox"/>	Non-English specification	(\$130) <input type="checkbox"/>	Notice of Appeal	(\$500) <input type="checkbox"/>	Filing a brief in support of an appeal	(\$500) <input type="checkbox"/> [500]	Request for oral hearing	(\$1,000) <input type="checkbox"/>	Acceptance of unintentionally delayed claim for priority under 35 U.S.C. 119, 120, 121, or 365 (a) or (c)	(\$1,370) <input type="checkbox"/>	Other: _____	<input type="checkbox"/>															
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<p>2. BASIC FILING FEE - Large Entity</p> <table> <thead> <tr> <th><u>FILING FEE</u></th> <th><u>SEARCH FEE</u></th> <th><u>EXAMINATION FEE</u></th> </tr> </thead> <tbody> <tr> <td><u>Application Type</u></td> <td></td> <td><u>Fee Paid</u></td> </tr> <tr> <td>Nonprovisional (\$300)</td> <td>(\$500)</td> <td>(\$200)</td> </tr> <tr> <td colspan="3">(Total = \$1000) <input type="checkbox"/></td> </tr> <tr> <td>Utility</td> <td></td> <td></td> </tr> <tr> <td>Design</td> <td>(\$200)</td> <td>(\$100)</td> </tr> <tr> <td colspan="3">(Total = \$430) <input type="checkbox"/></td> </tr> <tr> <td>Reissue</td> <td>(\$300)</td> <td>(\$500)</td> </tr> <tr> <td colspan="3">(Total = \$1400) <input type="checkbox"/></td> </tr> <tr> <td>Provisional Utility filing fee</td> <td></td> <td></td> </tr> <tr> <td colspan="3">(Total = \$200) <input type="checkbox"/></td> </tr> </tbody> </table>			<u>FILING FEE</u>	<u>SEARCH FEE</u>	<u>EXAMINATION FEE</u>	<u>Application Type</u>		<u>Fee Paid</u>	Nonprovisional (\$300)	(\$500)	(\$200)	(Total = \$1000) <input type="checkbox"/>			Utility			Design	(\$200)	(\$100)	(Total = \$430) <input type="checkbox"/>			Reissue	(\$300)	(\$500)	(Total = \$1400) <input type="checkbox"/>			Provisional Utility filing fee			(Total = \$200) <input type="checkbox"/>			<p>3. APPLICATION SIZE FEE: Sheets of Spec and Drawings <input type="checkbox"/> (\$250 for each 50 sheets in excess of 100, except for sequence and program listings)</p> <p>SUBTOTAL (2)+(3) (\$)</p> <p>4. EXTRA CLAIM FEES FOR UTILITY AND REISSUE:</p> <table> <thead> <tr> <th><u>Extra Claims</u></th> <th><u>Fee from Below</u></th> <th><u>Fee Paid</u></th> </tr> </thead> <tbody> <tr> <td>Total Claims <input type="checkbox"/> - 20** = <input type="checkbox"/> x <input type="checkbox"/> = <input type="checkbox"/></td> <td></td> <td></td> </tr> <tr> <td>Independent Claims <input type="checkbox"/> - 3** = <input type="checkbox"/> x <input type="checkbox"/> = <input type="checkbox"/></td> <td></td> <td></td> </tr> <tr> <td>Multiplic Dependent claims: <input type="checkbox"/> = <input type="checkbox"/></td> <td></td> <td></td> </tr> </tbody> </table> <p>** or number previously paid, if greater; For Reissues, see below</p> <p>Fee Description</p> <p>Claims in excess of 20 (\$50 per claim)</p> <p>Independent claims in excess of 3 (\$200 per claim)</p> <p>Multiple dependent claim, if not paid (\$360)</p> <p>**Reissue: each independent claim over 3 and more than in the original patent (\$200 per claim)</p> <p>**Reissue claims: each claim over 20 and more than original patent (\$50 per claim)</p> <p>SUBTOTAL (4) (\$)</p>		<u>Extra Claims</u>	<u>Fee from Below</u>	<u>Fee Paid</u>	Total Claims <input type="checkbox"/> - 20** = <input type="checkbox"/> x <input type="checkbox"/> = <input type="checkbox"/>			Independent Claims <input type="checkbox"/> - 3** = <input type="checkbox"/> x <input type="checkbox"/> = <input type="checkbox"/>			Multiplic Dependent claims: <input type="checkbox"/> = <input type="checkbox"/>		
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SUBMITTED BY		Complete (if applicable)		
Name (Print/Type)	Matthew P. Fitzpatrick	Registration No. (Attorney/Agent)	41,751	Telephone (513) 634-4287
Signature	<i>Matthew P. Fitzpatrick</i>			Date September 12, 2006

+ This collection of information is required by 37 CFR 1.17. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon individual case. Any comments on the amount of time you are required to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P. O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Fee Transmittal.doc (Revised for P&G on 04/15/2006)